

**SUBMITTED BY: EZEMENARI M. OBASI, PH.D., VICE PRESIDENT FOR RESEARCH & INNOVATION**  
**REPORT ON WAIVERS APPROVED**  
**TO BOARD STATUTE 2.41.01.140**

**BACKGROUND**

One research project required a petition to waive Statute 2.41.01.140 because of review restrictions on publishing the research results. This waiver has been approved by the Vice President for Research & Innovation to allow acceptance of the relevant grant or contract, acting in accordance with the University's research policy on restricted and proprietary research.

**OVERVIEW**

This project required a waiver to Board Statute 2.41.01.140 because the sponsor considers their data proprietary and would require approval for any publishing to occur. The waiver allowed acceptance of the study, "Predictability of long-term kidney outcomes based on clinical responses compared to renal histology in pediatric and adult patients with glomerular disease." The study is for the CureGN study which is an NIH funded study. Tej Mattoo, M.D., professor of pediatrics and urology in the School of Medicine. The Vice President for Research & Innovation's concurrence allows any publications resulting from this project to first obtain approval from the prime sponsor.

The project aims to gain valuable information to better understand the cause of glomerular disease, its response to therapy and its disease progression. CureGN represents one of the largest observational cohort studies of people with glomerular diseases. The research could lead to a peer-reviewed scientific publication/s that would help enhance clinical care of patients with certain kidney diseases. Ultimately, the goal is to have fewer patients need kidney biopsies for diagnosis and disease management.

Due to the strict user policies to the CureGN Ancillary Studies policy, all study results deriving from this data must first be submitted for review and approval by a publication and presentation committee. If approved, the study results will be published collaboratively with other core investigators and in a peer-reviewed journal.